

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | VIN      |        | 07-05-01 |
| O.I.P.E. CLASSIFIER       |          | 8      | 7-13-01  |
| FORMALITY REVIEW          | IN       | IN     | 10/23/01 |
| RESPONSE FORMALITY REVIEW | IN       | 50906  | 12/14/01 |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim    | Date |
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| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

830  
 10/23/01  
 288  
 2/13